

|                             |                         |              |                        |                                  |
|-----------------------------|-------------------------|--------------|------------------------|----------------------------------|
| SERIAL NUMBER<br>09/322,062 | FILING DATE<br>05/27/99 | CLASS<br>709 | GROUP ART UNIT<br>2755 | ATTORNEY DOCKET NO.<br>23005-719 |
|-----------------------------|-------------------------|--------------|------------------------|----------------------------------|

APPLICANT AVINOAM RUBINSTAIN, MACABIM, ISRAEL; YACKOV SFADYA, Kfar SABA, ISRAEL;  
SHIMON PELEG, HOD HASHARON, ISRAEL; NOAM ALROY, KADIMA, ISRAEL; AMNON  
HARPAK, HOLON, ISRAEL; BOAZ PORAT, HAIFA, ISRAEL.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

home SL

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED

home SL

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
VERIFIED

home SL

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 06/25/99

|  |   |                            |                        |                       |                            |
|--|---|----------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met          | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR<br>COUNTRY<br>ILX | SHEETS<br>DRAWING<br>9 | TOTAL<br>CLAIMS<br>15 | INDEPENDENT<br>CLAIMS<br>3 |
| Verified and Acknowledged <u>Examiner's Initials</u> <u>Initials</u> |   |                            |                        |                       |                            |

|         |                             |
|---------|-----------------------------|
| ADDRESS | SEE CUSTOMER NUMBER: 021971 |
|---------|-----------------------------|

|       |   |
|-------|---|
| TITLE | HIGH DATA RATE ETHERNET TRANSPORT FACILITY OVER DIGITAL SUBSCRIBER<br>LINES |
|-------|---|

|                                     |   |   |
|-------------------------------------|---|---|
| FILING FEE<br>RECEIVED<br><br>\$890 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>NO. _____ for the following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|-------------------------------------|---|---|